

FIRE DEPARTMENT  
SUPPORT SERVICES DIVISION

PLAN REVIEW  
385 KIMBARK STREET  
LONGMONT, CO 80501-5912  
303-651-8434 Fax 303-651-8930  
www.ci.longmont.co.us



## PERMIT APPLICATION

- TYPE OF PROJECT**    ☐ New Construction                      ☐ Tenant Improvement Construction                      ☐ Building Addition
- TYPE OF PERMIT**    ☐ Kitchen Hood                      ☐ Fire Alarm System                      ☐ Clean Agent System  
                                 ☐ Standpipe System                      ☐ Fire Sprinkler System                      ☐ Spray Booth  
                                 ☐ LPG Storage                      ☐ AST Installation                      ☐ UST Installation  
                                 ☐ UST Removal                      ☐ High Piled Combustible Storage                      ☐ Fire Pump

Date \_\_\_\_\_ Type of Construction \_\_\_\_\_ Occupancy Classification \_\_\_\_\_

Project Name \_\_\_\_\_ Project Address \_\_\_\_\_  
Sq. Ft. \_\_\_\_\_ Number of Stories \_\_\_\_\_

General Contractor Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

City of Longmont Contractor License Number \_\_\_\_\_

Fire Systems Contractor Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

City of Longmont Contractor License Number \_\_\_\_\_

Architect Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

Owner Name/Representative \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

### Fire Department Use Only

Building Permit # \_\_\_\_\_

Fire Plan Log # \_\_\_\_\_

Date Reviewed \_\_\_\_\_

Reviewed By \_\_\_\_\_

Date Notified \_\_\_\_\_

Received By \_\_\_\_\_

Comments:

Application Received

## FIRE CODES AND PLANNING

385 KIMBARK STREET  
LONGMONT, CO 80501-5912  
303-651-8303 Fax 303-651-8696  
www.longmontcolorado.gov/publicsafety



**FOR OFFICE USE ONLY – INCLUDE THIS DOCUMENT WITH COMPLETED PERMIT APPLICATION**

### INVOICE

DATE: \_\_\_\_\_

INVOICE #: \_\_\_\_\_

BILL TO: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

		CHARGE	NUMBER	TOTAL
Construction Permit – includes first plan review, first rough inspection and first final inspection only	Per riser, control panels/power supplies, pumps, tanks	200.00	X	=
	+ \$1.00 per device	1.00	X	=
Re-submittals, re-inspections and other additional inspections not included in the construction permit	Per hour – Minimum 1 hour (in quarter hour increments thereafter)	150.00	X	=
Tenant Finish Construction Permits	Per hour	200.00	X	=
Expedited application fee (to be paid at submittal)		100.00		=
Expedited or third party review when available	Per hour	200.00	X	
Operational permits required by Section 105.06	\$75.00 unless specifically established elsewhere	75.00	X	=

**TOTAL AMOUNT DUE** \_\_\_\_\_

Check # \_\_\_\_\_

Cash \_\_\_\_\_

Amount \_\_\_\_\_

Date paid \_\_\_\_\_

Company \_\_\_\_\_